

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	FILED DATE
APPLICANT(S)	

CLAIMS

AS FILED	5-25-26		AFTER 2ND AMENDMENT		AFTER 3RD AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1			1			
2						
3			1			
4					1	
5					1	
6						
7	6				6	
8	4				6	
9	4				6	
10	4				6	
11	4				6	
12	6				10	
13	6				6	
14	1				1	
15	1				1	
16	1				1	
17					1	
18					1	
19					1	
20	6				10	
21	4				6	
22	4				6	
23	4				6	
24	6				6	
25	6				6	
26	6				6	
27					1	
28					1	
29					1	
30					1	
31					1	
32					1	
33					1	
34					1	
35					1	
36					1	
37					1	
38					1	
39					1	
40					1	
41					1	
42					1	
43					1	
44					1	
45					1	
46					1	
47					1	
48					1	
49					1	
50					1	
TOTAL IND.	102		102			
TOTAL DEP.	7		7			
TOTAL CLAIMS	109		109			

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						